

Worksite Wellness

The Model Program

Wellness Champion Training
by
The Mississippi State Department of Health
Office of Preventive Health

By Jodi Rankin, Bureau Director, School and Community Health, MSDH

and

Murray L. Harber, Wellness Coordinator, Motivating Mississippi powered by WebMD

EXPECTATIONS

1. Explain the *Model Program*
2. Share the *Best Practice* approaches in worksite wellness
3. Share *evidence-base* strategies for worksite wellness

INDUSTRY BENCHMARKS

Using the HERO Health Management Practice Scorecard

Industry Benchmarks

- Strategic Planning
- Leadership Support & Culture
- Program Level Management
- Programs
- Communication and Engagement
- Data Management & Evaluation

Strategic Planning

- Needs assessment – interest survey, wellness committee, CDC Worksite Assessment
- Data Analysis – health, pharmacy, and EAP claims
- Initiative goals and objectives defined
- Availability of key program components to employees and spouse/dependents
- Availability of key program components to retirees/disabled
- Population-based approach
- Availability of health care-related benefits

Sample Strategic Plan

- Create a sustainable infrastructure within the organization
- Create an integrated evaluation system
- Create a comprehensive communication plan
- Develop an education-based programming model
- Partner with internal units to create healthy environments and health supporting policy
- Partner with health and benefits vendors to leverage resources
- Partner with community resources to engage dependents

Leadership Support & Culture

- Senior Leadership commitment and support
- Management and supervisor education and support
- Employee buy-in and engagement
- Employee Leadership Network – Wellness Champions
- Supportive environments – healthy vending, tobacco-free, active living environments
- Company policies that advocate optimal health

Program Level Management

- Coordination of services across the health continuum
 - Employee Benefits, Wellness Program, & EAP
 - Health Plan & Disease Management
 - Occupational Health/Safety, Workers Compensation & Disability Mgmt.
- Wellness Champions and Councils
 - Effective use of manuals and toolkits

Programs

- Health Risk Questionnaire with follow-up (Motivating Mississippi)
- Health screening and referrals
- Population-based wellness and health education
- Targeted lifestyle management programs
- Targeted Condition Management Programs
- Consumer medical decision support
- Other programs – Employee Assistance, Onsite Clinics, etc.

Engagement Methods

- Comprehensive communications plan
 - Awareness, promotion, and education
 - Stages of behavior change
- Incentives
 - HQ to get Annual Preventive Exam covered 100%
 - Participation in program incentives
 - Are dependents eligible
- Regular stakeholder status report
 - All levels of organization, dependents, retirees

Measurement & Evaluation

- Comprehensive data analysis and reporting
 - Stakeholder interest
 - Process evaluation data
 - Program participation data
 - Participant satisfaction data
 - Population health status data
 - Health care utilization and claims data
 - Presenteeism and productivity data
- Reported to Stakeholders
 - Leadership and Management
 - Employees and Dependents

Employer Health dashboard

Program Outcomes	Benchmark
Annual Participation	50% participates in at least one program
Cumulative health Assessment Participation and Health biometrics Screening	Minimum of 80% of population participates during the most recent 3 year period
Participant Satisfaction	90% of participants are satisfied with core elements of program
Health Risk Reduction	2+ % change in annual health risks
Annual Calculation of Program Investment	Program stakeholders are aware of program investment in EHM as a % of total health care expenditures
Annual Calculation of Individual Investment	Program stakeholders are aware of annual calculation of \$ invested per eligible employee in EHM
Return on Investment	.5:1 at end of year one, 2:1 at end of year two, and 3:1 at end of year three

EVIDENCE-BASE

Approaches to effective worksite wellness programming

Evidence-based for Worksite Wellness

- The role of the **Task Force** is to:
 - Oversee systematic reviews led by CDC scientists
 - Carefully consider and summarize review results
 - Make recommendations for interventions that promote population health
 - Identify areas within the reviewed topics that need more research
- The Task Force hopes those who use the Community Guide will:
 - **Use more interventions that have been shown to work**
 - **Use fewer interventions that have been shown not to work**
 - Research interventions for which there is not enough evidence to say whether or not they work

Worksite Health Promotion

- Worksite policies and programs may help employees reduce health risks and improve their quality of life.
- Worksite interventions can be delivered:
 - At the worksite (e.g., signs to encourage stair use, health education classes)
 - At other locations (e.g., gym membership discounts, weight management counseling)
 - Through the employee health benefits plan (e.g., flu shots, cancer screenings)

Worksite Health Promotion

- Interventions to promote season influenza vaccinations - Recommended
- Assessment of Health Risks
 - Alone – Insufficient Evidence
 - Plus health education with or without other interventions - Recommended
- Smoke-free policies to reduce tobacco use among workers - Recommended
- Incentives and competitions when used alone – Insufficient Evidence
- Incentives and competitions when combined with additional resources - Recommended

Worksite Health Promotion

- Obesity Prevention: Worksite programs to control overweight and obesity - Recommended
- Point-of-decision prompts to encourage use of stairs - Recommended
- Creation of or enhanced access to places for physical activity combined with informational outreach activities - - Recommended
- Recommends worksite programs intended to improve diet and/or physical activity behaviors based on strong evidence of their effectiveness for reducing weight among employees

CDC's Promising practices

Environmental and Policy

Enhanced access
to opportunities
for physical
activity
combined with
health education

Informational and Educational

Multicomponent
educational
practices

Exercise
prescriptions
alone

Behavioral Interventions

Weight loss
competitions
and incentives

Behavioral
Interventions
with and without
incentives

Thank you and Questions?
